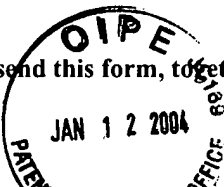


## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail**

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**Commissioner for Patents**  
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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence, including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" maintenance fee notifications.

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20995 7590 10/09/2003

**KNOBBE MARTENS OLSON & BEAR LLP**  
**2040 MAIN STREET**  
**FOURTEENTH FLOOR**  
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(Depositor's name)
(Signature)
(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/843,025	04/25/2001	Chen-Wei Chiu	UMACH.003A	7226

TITLE OF INVENTION: METHOD OF FABRICATING MICROMACHINED DEVICES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$300	\$965	01/09/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
GEYER, SCOTT B	2829	438-113000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Knobbe, Martens,
2. Olson & Bear, LLP
3. \_\_\_\_\_

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

UMACHINES, INC.

Pasadena, California

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

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- ☒ Publication Fee
- ☒ Advance Order - # of Copies 10

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(Authorized Signature) Bruce S. Itchkawitz (Date) 1/7/04

Bruce S. Itchkawitz, No. 47,677 Jan. 7, 2004

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01/13/2004 YPOLITE2 00000083 09843025

01 FC:2501  
 02 FC:1504  
 03 FC:8001

665.00 OP  
 300.00 OP  
 30.00 OP



**PATENT**

Case Docket No. UMACH.003A

Date: January 7, 2004

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant : Chen-Wei Chiu  
Appl. No. : 09/843,025  
Filed : April 25, 2001  
For : METHOD OF FABRICATING  
MICROMACHINED DEVICES  
Group Art Unit : 2829  
Class/Sub-Class : 438/113000  
Examiner : Scott B. Geyer

I hereby certify that this correspondence and all marked attachments are being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on

January 7, 2004

(Date)

Bruce S. Itchkawitz, Reg. No. 47,677

**TRANSMITTAL LETTER**

**MAIL STOP ISSUE FEE**  
**Commissioner for Patents**  
**P.O. Box 1450**  
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09/843,025  
CLASS 438/113000  
FILED APR 25 2001  
METHOD OF FABRICATING  
MICROMACHINED DEVICES

Dear Sir:

Enclosed for filing is the Issue Fee for the above-identified application:

- (X) Form PTOL-85.
- (X) A check in the amount of \$995 to cover the issue fee, publication fee, and advanced order of copies is enclosed.
- (X) The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment, to Account No. 11-1410.
- (X) Return prepaid postcard.

Bruce S. Itchkawitz  
Registration No. 47,677  
Attorney of Record  
Customer No. 20,995  
(949) 760-0404